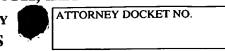
BIRCH, STEWART, KOLASCH & BIRCH, LLP

ARATION AND POWER OF ATTORNEY FOR PATENT AND DESIGN APPLICATIONS



PLEASE NOTE: YOU MUST COMPLETE THE FOLLOWING:



As a below named inventor, I hereby declare that: my residence, post office address and citizenship are as stated next to my name; that I verily believe that I am the original, first and sole inventor (if only one inventor is named below) or an original, first and joint inventor (if plural inventors are named below) of the

	subject matter which is claimed and for which a patent is sought on the invention entitled:*								
Insert Title	Scanning Micros	copic Method Ha	ving High Axial Resolu	tion					
Check Box If									
Appropriate - For Use Without Specification Attached	the specification of which is attached hereto unless the following box is checked: was filed on as United								
	States Application Numberor PCT International Application Number_PCT/EP99/10142 filed on December 20, 1999								
	and was amended on (if applicable).								
	I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment referred to above. I acknowledge the duty to disclose information which is material to patentability as defined in Title 37, Code of Federal Regulations, §1.56. I do not know and do not believe the same was ever known or used in the United States of America								
	before my or our invention thereof, or patented or described in any printed publication in any country before my or our invention thereof, or more than one year prior to this application, that the same was not in public use or on sale in the United States of America more than one year prior to this application, that the invention has not been patented or made the subject of an inventor's certificate issued before the date of this application in any country foreign to the United States of America on an application filed by me or my legal								
آ ش M	representatives or assigns more than twelve months (six months for designs) prior to this application, and that no application for patent or inventor's certificate on this invention has been filed in any country foreign to the United States of America prior to this application by me or my legal representatives or assigns, except as follows.								
	I hereby claim foreign priority benefits under Title 35, United States Code, §119 (a)-(d) of any foreign application(s) for patent or inventor's certificate listed below and have also identified below any foreign application for patent or inventor's certificate having a filing date before that of the application on which priority is claimed:								
E	Prior Foreign Application		04 4000	Priority Claimed					
Insert Priority Information	60/113,478 → (Number)	USA (Country)	December 21, 1998 (Month/Day/Year Filed)	Yes No					
(if appropriate)	98 124 314.0	Europe	December 21, 1998						
	(Number) 198 60 549.8	(Country) Germany	(Month/Day/Year Filed) December 21, 1998	Yes No ☑ □					
lab lab	(Number)	(Country)	(Month/Day/Year Filed)	Yes No					
	(Number)	(Country)	(Month/Day/Year Filed)	Yes No					
	(Number)	(Country)	(Month/Day/Year Filed)	Yes No					
	I hereby claim the benefit under Title 35, United States Code, § 119(e) of any United States provisional application(s) listed below.								
	(Application Number)		(Filing Date)						
	(Application Number)		(Filing Date)						
	All Foreign Applications, if any, for any Patent or Inventor's Certificate Filed More Than 12 Months (6 Months for Designs) Prior To The Filing Date of This Application: Country Application No. Date of Filing (Month/Day/Year)								
	listed below and insofar a	s the subject matter of ea	ted States Code, §120 of any United States of the claims of this application is	not disclosed in the					
	prior United States application in the manner provided by the first paragraph of Title 35, United States Code, §112, I acknowledge the duty to disclose information which is material to patentability as defined in Title 37, Code of Federal Regulations, §1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application:								
	(Application Number)		ng Date) (Status — patented, per	(Status — patented, pending, abandoned)					

*NOTE: Must be completed.

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I hereby appoint the following attorneys to prosecute this application and/or an international application based of its application and to transact all business the Patent and Trademark Office connected therewith in connection with the resulting patent based on instructions received from the entity who first sent to application papers to the attorneys identification below, unless the inventor(s) or assignee provides said attorneys with a written notice to the contrary:

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(USPTO Approved 3-90) (Revised 8-95) Send Correspondence to: BIRCH, STEWART, KOLASCH AND BIRCH, LLP

P.O. Box 747.

Falls Church, Virginia 22040-0747

Telephone: (703) 205-8000 Facsimile: (703) 205-8050

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

L		1 40 1					
Full Name of First or Sole Inventor:	GIVEN NAME	EAMILY NAME	INVENTOR'S SIGNATURE	-	DATE*		
Insert Name of Inventor Insert Date This	Juergen	Rolf MUELLER			11/4/01		
Document Is Signed		State & Country)	0,,	CITIZENSHIP			
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Insert Post Office	POST OFFICE A	ADDRESS (Complete Street Add	fress including City, State & Country)	Lohbellstieg	37. Fo - V		
Address	Gluckstr	asse_4a, 22081	Hamburg, Germany	~ ~ ~ ~	mburg Ext		
Full Name of Second Inventor, if any:	GIVEN NAME	FAMILY NAME	INVENTOR'S SIGNATURE		DATE		
see above	Residence (City,	, State & Country)		CITIZENSHIP			
** <u>*</u>	BOOT OFFICE	ADDRESS (Complete Street Add	trans including City State 9 Country)				
	POST OFFICE A	ADDRESS (Complete Street Add	dress including City, State & Country)				
Full Name of Third Inventor, if any:	GIVEN NAME	FAMILY NAME	INVENTOR'S SIGNATURE		DATE*		
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see above	Posidoneo (City	, State & Country)	i	CITIZENSHIP	I		
	nesiderice (Oity,	State & Country)		OTTIZENOTIII			
	POST OFFICE A	ADDRESS (Complete Street Add	dress including City, State & Country)				
Full Name of Fourth			Lange Topic Cloud Tupe		DATE*		
Inventor, if any:	GIVEN NAME	FAMILY NAME	INVENTOR'S SIGNATURE		DATE		
see above							
	Residence (City,	, State & Country)		CITIZENSHIP			
	POST OFFICE ADDRESS (Complete Street Address including City, State & Country)						
Full Name of Fifth Inventor, if any:	GIVEN NAME	FAMILY NAME	INVENTOR'S SIGNATURE		DATE*		
see above							
	Residence (City,	, State & Country)		CITIZENSHIP			
*Note: Must be completed — date this document is	POST OFFICE ADDRESS (Complete Street Address including City, State & Country)						
signed.							
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